



PATIENT

Thurston Waffles
Nelson

PRESENTING CLINICAL SIGNS

Nasal discharge x 4-6 weeks. Initially was a green discharge that turned to clear after a round of Clindamycin. Is now greenish/yellow again. Medical history from previous vet reflects the discharge from left nostril only, but only appreciated discharge from right nostril today. Cytology of discharge in late June/early July was cocci bacteria. Heavy tartar build-up with excessive gingival tissue on all 4 quadrants-a sample of gingival tissue was obtained for histopath prior to the CT scan. The teeth were also cleaned prior to the CT scan. Culture samples were obtained & submitted for PCR testing & culture/sensitivity. Patient is currently on benazepril & amlodipine. Chronic kidney disease.
Abnormal PE/Chem/CBC/UA Results: Thick green/yellow nasal discharge of right nostril crusting nostril shut at times.

SPECIES

Feline

BREED

Siberian Mix

COMPUTED TOMOGRAPHY OF THE SKULL

A high resolution pre- and post-contrast CT study of the skull is provided for review.

SEX

MN

COMPUTED TOMOGRAPHIC FINDINGS

Triadan 307 and 407 are absent.

AGE

12 Years

The ventral aspect of the left nasal cavity is obliterated by post contrast mild contrast material and moderate destruction of the nasal conchal & turbinate structures is noted. The mild contrast enhancing material is extending up into the ventral aspect of the right nasal cavity. In the dorsal aspect of the left nasal cavity, a moderate amount of fluid attenuating material is noted. The horizontal plate of the left palatine bone presents moth eaten osteolytic lesions.

INTERPRETED BY

Sebastian Schaub, DVM
Dr. med. vet. DipECVDI

Both temporomandibular joints present congruent joint spaces with even subchondral bone surfaces and are considered within normal limits.

Both tympanic bullae are aerated, the mucosal lining is not seen, the bony wall is smooth and thin. The external ear canals are within normal limits.

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The brain presents no deviation from normal anatomy and symmetry. The brain parenchyma is homogeneous and within normal limits for attenuation and distribution of contrast enhancement. The ventricular system is non-dilated and symmetric.

REFERRING VET

Dr. Stephanie Kobiela

The submandibular and medial retropharyngeal lymph nodes are small and elongated with a normal short-to-long-axis-ratio is < 0.5, the attenuation and contrast enhancement pattern is uniform.

In the subcutaneous tissue at the right aspect of the neck, level with C2, an ovoid shaped lipoma is seen, measuring 7 mm in size.

INVOICE

53803

COMPUTED TOMOGRAPHIC DIAGNOSIS

- Mild contrast enhancing nasal soft tissue mass, L>>R, with osteolytic lesions of the left palatine bone
- Absent triadan 307&407

DATE

8-29-22

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

The imaging findings of the nasal mass are highly concerning for primary nasal neoplasia, such as lymphosarcoma, melanoma, adenocarcinoma, squamous cell carcinoma, other. Theoretically a rare nasal polyp is a differential. Rhinoscopy including biopsy can be used as advanced diagnostic



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tests. Based on the results of the advanced diagnostic tests, the chances of radiation therapy can be discussed with oncologist.

Consider full tumor staging.

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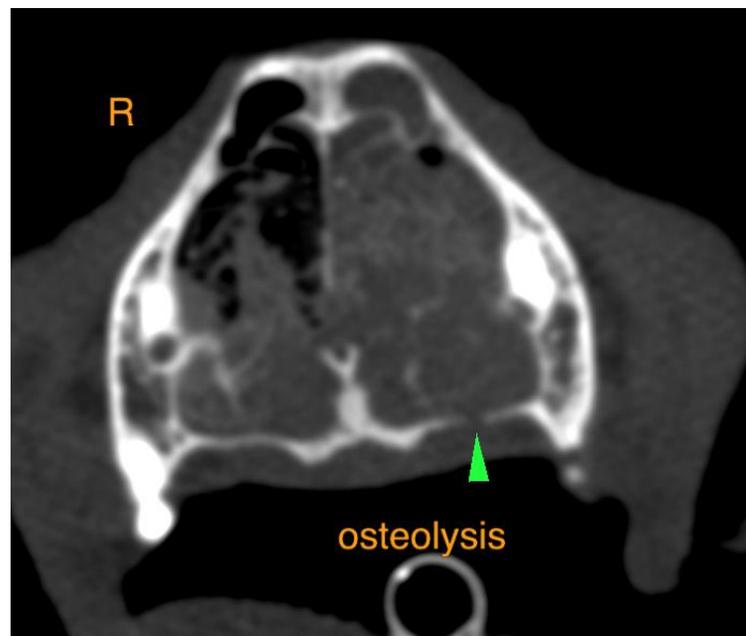
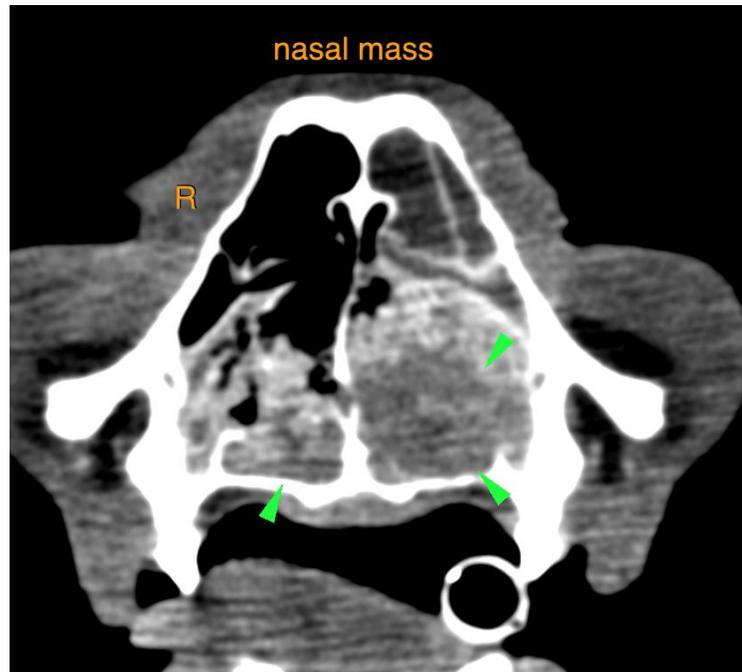
Dr. Stephanie Kobiela

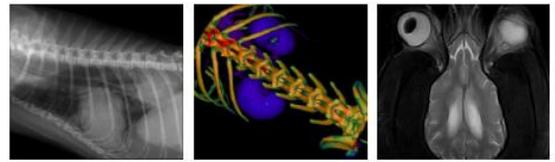
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The information and recommendations provided are based on the images presented by the referring veterinarian/sonographer. No evaluation can be communicated regarding pathology that was not visible in the image/video clips provided.

Thank you for this referral. If the clinical or image interpretation does not parallel your findings or if I can be of any further assistance please contact me.

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